

**St. Hilda St. Patrick Episcopal Church**  
**Reimbursement/Check Request**

See Check Authorization Process Below.

Amount:     \$ \_\_\_\_\_

Purpose of the expense: \_\_\_\_\_

Charge against Budget: \_\_\_\_\_

Check payable to: \_\_\_\_\_

Select One     \_\_\_\_\_ Leave check at the Church Office

                  \_\_\_\_\_ Mail the check to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Printed Name of the person submitting request: \_\_\_\_\_

Requester's Signature:                   \_\_\_\_\_                   Date  
\_\_\_\_\_

Authorizer's Signature:                 \_\_\_\_\_                 Date \_\_\_\_\_

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For Accounting Use:

Date Paid:                   \_\_\_\_\_

Check Number:               \_\_\_\_\_

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Check Authorization Process:

1. Ensure that there is sufficient fund or budget money to cover the expected expense. (Check with group leader or Treasurer.)
1. Purchase item and retain receipt.
2. Fill out Reimbursement Request Form. (form may be found On Line or in the bracket on Office inner door)
3. Obtain Authorization signature from group leader. If the group leader is not available the following may authorize the expenditure:
  - a. Senior Warden,
  - b. Junior Warden,
  - c. Vicar
4. Submit authorized form and receipts to the Treasurer by putting it into the Treasurers tray in the outer office.